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File: USPT

Jul 13, 1999

US-PAT-NO: 5922674

DOCUMENT-IDENTIFIER: US 5922674 A

**** See Image for Certificate of Correction ****TITLE: Method of treatment using chemotherapy and erythropoietin

DATE-ISSUED: July 13, 1999

INVENTOR--INFORMATION:

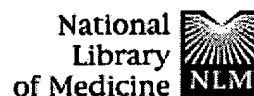
NAME	CITY	STATE	ZIP CODE	COUNTRY
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US-CL-CURRENT: 514/2; 514/12, 514/21, 514/922

CLAIMS:

That which is claimed is:

1. A method of inhibiting endothelial cell proliferation in a subject treated with a platinum coordination complex chemotherapeutic agent, comprising administering to the subject erythropoietin simultaneously with the administration of said chemotherapeutic agent, wherein said erythropoietin is administered in an amount sufficient to inhibit endothelial cell proliferation compared to the endothelial cell proliferation that would occur in the absence of erythropoietin.
2. A method of inhibiting endothelial cell proliferation in a subject treated with a platinum coordination complex chemotherapeutic agent, comprising administering to the subject erythropoietin prior to said chemotherapeutic agent, wherein said erythropoietin is administered in an amount sufficient to inhibit endothelial cell proliferation compared to the endothelial cell proliferation that would occur in the absence of erythropoietin.
3. A method according to claim 1 wherein said chemotherapeutic agent is cisplatin.
4. A method according to claim 1 wherein said subject has a vascularized solid tumor.
5. A method according to claim 1, wherein said chemotherapeutic agent is selected from the group consisting of cisplatin and cyclophosphamide.
6. A method according to claim 2 wherein said chemotherapeutic agent is cisplatin.
7. A method according to claim 2 wherein said subject has a vascularized solid tumor.
8. A method according to claim 2, wherein said chemotherapeutic agent is selected from the group consisting of cisplatin and cyclophosphamide.



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☐ 1: Am J Hypertens. 1993 Feb;6(2):103-7.

Related Articles, Li

Intravenous erythropoietin (rHuEPO) administration increases plasma endothelin and blood pressure in hemodialysis patients.

Carlini R, Obialo CI, Rothstein M.

Jewish Hospital, Washington University, St. Louis, Missouri.

The correction of anemia in end stage renal disease with recombinant human erythropoietin (rHuEPO) is associated with hypertension in about a third of hemodialysis patients. In the present study, we investigated the role of endothelin (ET-1) on rHuEPO associated hypertension and the effect of the rHuEPO administration route on plasma ET-1 levels. We studied 50 stable chronic hemodialysis patients who were divided into three groups: 26 patient received rHuEPO intravenously (IV) and 21 subcutaneously (SC). The control group was nine patients who were treated with nandrolone decanoate (ND). Prehemodialysis ET-1 plasma levels were correlated with mean arterial pressure (MAP), hematocrit (Hct), time on dialysis, and rHuEPO doses. The antihypertensive therapeutic index (ATI) was used to determine the changes in blood pressure medication intake. We observed that the ET-1 levels were significantly higher in the IV group (19.3 ± 2) than the SC (5.0 ± 0.6) or ND groups (3.6 ± 0.4 pg/mL) ($P < 0.001$, IV v SC or ND). After IV rHuEPO treatment, there were increases in both MAP (pre- v post-rHuEPO, $P < .001$) and in ATI (pre- v post-rHuEPO, $P < .001$). In the SC group, the increases in MAP and ATI were not significant. Only the IV group showed a significant correlation between MAP and ET-1 levels ($r = .05$, $P = .02$). To accomplish the same Hct, the IV group received higher rHuEPO doses than those of the SC (180 ± 15 v 87 ± 12 U/kg/week) ($P < .001$). No significant correlations were found between the plasma ET-1 levels and Hct, time on dialysis and rHuEPO doses. (ABSTRACT TRUNCATED AT 250 WORDS)

Publication Types:

- Clinical Trial
- Controlled Clinical Trial

PMID: 8471228 [PubMed - indexed for MEDLINE]